



Oregon Department of Human Services

Information Memorandum

Originating Cluster:

Seniors and People with Disabilities

Authorized by: Catherine A. Cooper, Deputy
Assistant Director
Signature

IM Number: SPD-IM-03-103

Date: October 29, 2003

Subject: Changes to Client Maintenance System (UCMS)

Applies to (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County DD Program Managers |
| <input checked="" type="checkbox"/> Area Agencies on Aging | <input type="checkbox"/> County Mental Health Directors |
| <input checked="" type="checkbox"/> Children Adults and Families | <input type="checkbox"/> Health Services |
| <input checked="" type="checkbox"/> Community Human Services | <input checked="" type="checkbox"/> Seniors and People with Disabilities |
| <input type="checkbox"/> Other (please specify): _____ | |

Message: Please read the attached information regarding changes that were made to the Client Maintenance system on the evening of October 28, 2003. This transmittal is designed to outline the changes with a special focus on the adult medical programs (e.g. OSIPM, QMB, etc).

If you have any questions about this information, contact:

Contact(s):	DHS HelpDesk		
Phone:	503-345-5623	Fax:	
E-mail:	dhr.helpdesk.state.or.us		

Overview:

Historically, the number in the need group for medical programs has been captured in the # in Med field on the UCMS screen. This coding scheme has been error prone, because it has not allowed staff to adequately record the number in the medical need group when multiple medical programs were represented on a single UCMS case.

Changes have been made to the UCMS screen. Some fields have been removed, others have been moved to a different location on the screen, and new fields have been added. These changes have been made to allow staff to adequately capture the number in the medical need group for up to five (5) medical programs on a single UCMS case. Please note that although the potential exists to code up to five (5) medical programs on a single UCMS case, the current policies and procedures concerning case combination for SPD programs still apply. For example, staff may continue to code OSIPM and QMB program eligibility on the same UCMS case. Staff cannot, however, code a two person case in which one person has OSIPM program eligibility and another has OHP program eligibility. We will look at the possibility of allowing “new combinations” of medical eligibility on a single UCMS case in later phases of this project.

The changes to the UCMS screen are scheduled for implementation during CMS end of month processing on the night of October 28th. At the same time, Oregon ACCESS will change to reflect the new fields.

Changes to the UCMS screen:

The following fields have been removed from the UCMS screen:

- # Med (Number for the medical need group income standard)
- Pay Prf: Sch Hrs (Pay After Performance scheduled hours)
- Actual/GC Hrs (Pay After Performance actual/good cause hours)
- Appt (Redetermination appointment date)

The following fields have been moved to a different location on the UCMS screen:

- Load (Caseload code)
- Serv Wkr (Service worker ID)

The following new fields have been added to the UCMS screen:

- # OHP (number in the OHP need group)
- Med prg/# (medical program and number in that program's need group)

The screen print below identifies the areas in which new fields have been added:

UCMS										Fast Path		EB	
										Rel		Byp Prcs	
Case Name										Next Per		Auth Repr	
Res Str										City/St		Zip	
Fips Cnty										Tele			
Mail Str										City/St		Zip	
Prog Br Case SCD WCM Case Stat										Last Chg		Lang	
0000 0													
Incm										Req Date		Tot Rsrc	
Eff Date										# Hse		# OHP	
Reas										Ntce		Prnt	
943										Print N		Load	
CC Wrk Hrs										# ERDC			
Tr-Cd										Hld Type		Hld Rsns	
Ovp:										Prev Ovp:			
Act Prov										TANF Sit End		Pre Pay	
APR										OHP Updt		Prem Stat:	
Waiv										Disq		Deny	
Rvw										Pkt#		Medl Rvw	
DD:													
PL Ingnt										Recip		N/R	
C/D													
F3=EXIT F6=FAST PATH F9=SAVE F15=MANL F18=COPY													
F1=Hlp F2=Add F7=Bkwd F8=Fwd F16=Alias/Updt F17=ENRC F23=PCMS F24=CMUP													

How do the new fields work?

In order to allow staff to capture the number in the need group for multiple medical programs on a single UCMS case, two new data items were added. As shown on the above screen print, “# OHP” and “MED prg/#” are new fields. For P2 OHP cases, staff should enter the number in the OHP need group in the # OHP field. For all other medical programs, the number in the medical need group will be entered in the MED prg/# fields.

The MED pgm/# portion of the UCMS screen actually contains four “sets” of fields. Each “set” has a place for the worker to enter a medical program identifier and a numeric figure that represents the number in the need group for that medical program. The medical program identifier generally corresponds to the case descriptors currently in use to identify medical program eligibility. For example, QMB would be the medical program identifier that would be used to indicate that there is someone on the case eligible for the QMB program.

Most of the medical programs that CAF-SS and SPD administer have case descriptors to identify eligibility. However, the OSIPM program has not historically required a case descriptor to denote medical eligibility for the OSIPM program. A new medical program identifier, OSP, has been created to allow staff to enter the number in the OSIPM need group. The new code is only for use in the

Following are a list of valid medical program identifiers that may be used in the new MED pgm/# fields:

MAA = Medical Assistance Assumed
MAF = Medical Assist to Families
EXT = Extended Medical Benefits
SAC = Substitute/Adoptive Care Med
SCP = State Childrens' Program

UCMS	XX1111				Fast Path	EB
				Next Per	Rel Byp Prcs	
Case Name	CASE, HUSBAND M			Auth Repr		
Res Str	123 ADDRESS ST			City/St SALEM OR		Zip 97303
Fips Cnty	047			Tele 503 2222222		
Mail Str				City/St		Zip
Prog Br Case SCD WCM I Case Stat Last Chg Lang EN						
D4 2418 XX1111 7 VP						
Incm NEW Req Date 11-01-03 Tot Rsrc 0.00						
Eff Date 11-01-03 # Hse 02 # OHP 00 MED prg/# OSP 01 QMB 02 00 00						
Reas Ntce Prnt 943 Print N Load ZZ Serv Wkr ZZZ						
CC Wrk Hrs 0 # ERDC 00						
Tr-Cd Hld Type Hld Rsns Ovp: 0.00 Prev Ovp: 0.00						
Act Prov TANF Sit End Pre Pay 0.00						
APR OHP Updt Prem Stat: Waiv Disq Deny End						
Rvw 10-04 Pkt# 99 Medl Rvw NFM DD:						
PL Ingnt Recip N/R C/D						
A AD CASE, HUSBAND M SSB NCP QMM APD						
B NO CASE, WIFE M PEN						
F3=EXIT F6=FAST PATH F9=SAVE F15=MANL F18=COPY F1=Hlp F2=Add F7=Bkw d F8=Fwd F16=Alias/U p dt F17=ENRC F23=PCMS F24=CMUP						

How is the number in the need group used in the UCMS eligibility and benefit calculations?

The computer will use the number in the need group to determine basic program eligibility and program benefit amounts. The number in the need group helps the computer determine which standards to apply to the case. This change will correct a long standing problem, by allowing a spouse to be included in the OSIPM need group, even if they are not in the benefit group.

A special note about unborns: Both the OSIPM and the OHP program include unborns in the medical need group. In the past, for some programs, the system would increase the need group “behind the scenes” to account for unborns. Now the system will use the number you enter in the MED pgm/# fields to determine the need group for each medical program. Staff should be careful to include unborns in the number entered in the MED pgm/# fields, as appropriate.

Conversion

During CMS end of month processing on the evening of October 28th, a system conversion will take place. In order to ensure that no clients are negatively impacted, the system will “calculate” the number in the medical need group using the old system coding. Then, the system will automatically fill the Med pgm/# fields with that number and the appropriate medical program identifier(s). Since we currently only have one number, it will use the same number for every medical program represented on the case. This may result in some situations in which the number in the Med pgm/# field is incorrect, due to the limitations of the current system. Staff should verify that the data in the new fields is correct as they update cases in the normal course of their work.

Additional Systems Corrections

We have also made system modifications to correct some long standing problems. There are essentially two areas in which we made changes.

First, since we began using the _5 program code to record presumptive eligibility in February 2003, we have not had a way to record the client’s basis of need (e.g. blind, disabled). Two new case descriptors have been created. They are required on all _5 cases. They are:

- PGB - OSIPM Presumptive or General Assistance Cash Eligibility based on blindness

- PGD - OSIPM Presumptive or General Assistance Cash Eligibility based on disability

Second, at the request of field staff and field managers, three additional case descriptors have been created. These case descriptors are used to track a client's OSIPM presumptive eligibility status.

PMP - OSIPM presumptive medicaid pending

PMA - OSIPM presumptive medicaid approved

PMD - OSIPM presumptive medicaid denied

Oregon ACCESS

The Oregon ACCESS system has been updated to reflect the UCMS changes. Staff should continue to use Oregon ACCESS integration to update their UCMS records. The new fields are located on the Medical Tab of the Benefits section. Shortly after the initial mainframe conversion is completed, a systems conversion will take place on the Oregon ACCESS side. At that point, the data on the mainframe and Oregon ACCESS will be synchronized.

Oregon Access [Office : Cascades West Council of Governments (2211) Profile Type :- Branch]

File Edit Select Status Transfer View Mainframe Windows Help

Case for KATHERINE M CASE / Case Nmbr: FR9753 (Case Branch : Cascades West Council of Governments)

Case Overview **Medical Assistance** Foodstamps Service General Assistance OAA

ACCESS

Medical Benefit Detail

Inc: **NEW** Eff Date: **07/01/2003** NRD: ☐ Elig Rvw Date: **12/2003** NFM: ☒ Med Rvw Date: **00/0000**

Program: **4** # Hse: **01** # OHP: **00** Med Prg/#: **OSP 1**

Spend Down Start Date: **00/00/0000** End Date: **00/00/0000** Spend Down Minus Expenses **NA**

Case #: **FR9753** Reas: ☐

Medical Benefit Applicant(s)

Person: **CASE, KATHERINE M** Prime #: **PY801C1L**

Case Status: **Approved** Case Status Date: **00/00/0000**

Med Elig Date: **07/01/2003**

Case Descriptors: **NSS**

Admin Rule And Reason for Action:

hsint02 (3511) 10/29/2003 12:57 pm

Examples

Following are some additional examples of how the UCMS case might look for various scenarios that are typically seen in SPD/AAA offices.

Scenario #1: An single adult living alone in the community. No waived services. Client is OSIP and OSIPM eligible.

[illegible]

Scenario #2: Husband and wife, living together in the community. No waived services. Both are OSIPM and QMB eligible.

UCMS	XX1111				Fast Path	EB
				Next Per	Rel	Byp Prcs
Case Name	CASE, HUSBAND M			Auth Repr		
Res Str	123 ADDRESS ST			City/St	SALEM OR	Zip 97303
Fips Cnty	047			Tele	503 2222222	
Mail Str				City/St		Zip
Prog	Br	Case	SCD	WCMI	Case Stat	Last Chg
D4	2418	XX1111	7		VP	Lang EN
	Incm	NEW		Req Date	11-01-03	Tot Rsrc 0.00
Eff Date	11-01-03	# Hse	02	# OHP	00	MED prg/#
Reas		Ntce		Prnt	943	Print N Load ZZ
CC Wrk Hrs	0	# ERDC	00			Serv Wkr ZZZ
Tr-Cd	Hld Type	Hld Rsns		Ovp:	0.00	Prev Ovp: 0.00
Act Prov	TANF	Sit End		Pre Pay	0.00	
APR	OHP Updt	Prem Stat:	Waiv	Disq	Deny	End
Rvw	10-04	Pkt# 99		Medl Rvw	NFM	DD:
PL	Ingnt	Recip		N/R		C/D
A	AD	CASE, HUSBAND M		SSB		NCP NSS QMM
B	AD	CASE, WIFE M		SSB		QMM
F3=EXIT F6=FAST PATH F9=SAVE F15=MANL F18=COPY						
F1=Hlp F2=Add F7=Bkwd F8=Fwd F16=Alias/Updt F17=ENRC F23=PCMS F24=CMUP						

Scenario #3: Single adult living in the community with a roommate. No waived services. Client is OSIPM, and QMB eligible.

UCMS	XX1111				Fast Path	EB
				Next Per	Rel	Byp Prcs
Case Name	CASE, MISSUS M			Auth Repr		
Res Str	123 ADDRESS ST			City/St	SALEM OR	Zip 97303
Fips Cnty	047			Tele	503 2222222	
Mail Str				City/St		Zip
Prog	Br	Case	SCD	WCMI	Case Stat	Last Chg
D4	2418	XX1111	7		VP	Lang EN
	Incm	NEW		Req Date	11-01-03	Tot Rsrc 0.00
Eff Date	11-01-03	# Hse	02	# OHP	00	MED prg/#
Reas		Ntce		Prnt	943	Print N Load ZZ
CC Wrk Hrs	0	# ERDC	00			Serv Wkr ZZZ
Tr-Cd	Hld Type	Hld Rsns		Ovp:	0.00	Prev Ovp: 0.00
Act Prov	TANF	Sit End		Pre Pay	0.00	
APR	OHP Updt	Prem Stat:	Waiv	Disq	Deny	End
Rvw	10-04	Pkt# 99		Medl Rvw	NFM	DD:
PL	Ingnt	Recip		N/R		C/D
A	AD	CASE, MISSUS M		SSB SSI	SIP ESB	NCP NSS QMM

PL	Ingnt	Recip		N/R	C/D
A	AD	CASE, WAIVERED		SSB SVC	NCP APD
F3=EXIT F6=FAST PATH F9=SAVE F15=MANL F18=COPY					
F1=Hlp F2=Add F7=Bkwd F8=Fwd F16=Alias/Updt F17=ENRC F23=PCMS F24=CMUP					

Scenario #6: Single adult, living alone in the community. Client is eligible for OHP.

UCMS	XX1111				Fast Path	EB
				Next Per	Rel	Byp Prcs
Case Name	CASE, OHP			Auth Repr		
Res Str	123 ADDRESS ST			City/St SALEM OR		Zip 97303
Fips Cnty	047			Tele 503 2222222		
Mail Str				City/St		Zip
Prog	Br Case SCD	WCMi Case Stat	Last Chg			Lang EN
D4	2418 XX1111 7					
	IncM NEW	Req Date 11-01-03	Tot Rsrc	0.00		
Eff Date 11-01-03	# Hse 01 # OHP 01	MED prg/#	00	00	00	00
Reas	Ntce	Prnt	943 Print N	Load ZZ	Serv Wkr	ZZZ
CC Wrk Hrs	0	# ERDC 00				
Tr-Cd	Hld Type	Hld Rsns		Ovp:	0.00 Prev Ovp:	0.00
Act Prov	TANF Sit End		Pre Pay	0.00		
APR	OHP Updt C	Prem Stat:	Waiv	Disq	Deny	End 04/30/04
Rvw 10-04 Pkt# 99			Medl Rvw	NFM	DD:	
PL	Ingnt	Recip		N/R	C/D	
A	AD	CASE, OHP		HPI STD	OPU	
F3=EXIT F6=FAST PATH F9=SAVE F15=MANL F18=COPY						
F1=Hlp F2=Add F7=Bkwd F8=Fwd F16=Alias/Updt F17=ENRC F23=PCMS F24=CMUP						

Scenario #7: Though SPD/AAA staff do not typically handle MAA or EXT medical, here is a sample case in which OHP, MAA, and EXT are all represented.

UCMS	XX2222				Fast Path	EB
				Next Per	Rel	Byp Prcs
Case Name	CASE, EXAMPLE			Auth Repr		
Res Str	123 ADDRESS ST			City/St SALEM	OR	Zip 97303
Fips Cnty	047			Tele 503 2222222		
Mail Str				City/St		Zip
Prog	Br Case SCD	WCMi Case Stat	Last Chg			Lang EN
P2	5503 XX2222 9					
	IncM REOPEN	Req Date 07-01-03	Tot Rsrc	0.00		
Eff Date 07-01-03	# Hse 04 # OHP 01	MED prg/#	MAA 02 EXT 01	00	00	
Reas	Ntce	Prnt	943 Print N	Load K2	Serv Wkr	
CC Wrk Hrs	0	# ERDC 00				
Tr-Cd	Hld Type	Hld Rsns		Ovp:	0.00 Prev Ovp:	0.00
Act Prov	N TANF Sit End		Pre Pay	0.00		
APR	OHP Updt	Prem Stat:	Waiv	Disq	Deny	End 01/31/04
Rvw 12-03 Pkt# 1A			Medl Rvw	DD:		
PL	Ingnt	Recip		N/R	C/D	MORE
A	AD	CASE, EXAMPLE		STD HPI	OPU	
B	AD	CASE, MAA			MAA	

C	CH	CASE, EXT	AEM	EXT
D	CH	CASE, MAA CHILD	ET	MAA

F3=EXIT F6=FAST PATH F9=SAVE F15=MANL F18=COPY
F1=Hlp F2=Add F7=Bkwd F8=Fwd F16=Alias/Updt F17=ENRC F23=PCMS F24=CMUP